

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

155945

FILING DATE

02-16-88

APPLICANT(S)

Springer, et al

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1			1	
9		1				
10	1					
11		1				
12	1					
13		1				
14		2				
15	1					
16		1				
17		1				
18		1				
19		1				
20		5				
21		3				
22	1					
23		5				
24		5				
25	1					
26		1				
27		1				
28		3				
29		3				
30	1					
31	1					
32		1				
33		1				
34		1				
35		1				
36		1				
37		1				
38		1				
39		1				
40		1				
41		1				
42		1				
43		1				
44	1					
45		1				
46		1				
47		1				
48		1				
49		1				
50		1				
TOTAL IND.	9					
TOTAL DEP.	72					
TOTAL CLAIMS	81					

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51	1					
52	1					
53	1					
54	1					
55		2				
56		2				
57		2				
58		2				
59		2				
60		2				
61	1					
62	1					
63		2				
64		2				
65		2				
66	1					
67	1					
68						
69						
70						
71						
72						
73						
74						
75						
76						
77						
78						
79						
80						
81						
82						
83						
84						
85						
86						
87						
88						
89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.	8					
TOTAL DEP.	9					
TOTAL CLAIMS	17					